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AUTHOR Hutchison, Theresa D.; Scherman, Avraham
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ABSTRACT

This document presents a program for training volunteers to assist individuals and families who are going through a crisis related to terminal illness and death. The training is described as being both didactic and experiential. A discussion of the didactic portion of the program includes descriptions of: (1) the stages of preparatory grief as outlined by Elisabeth Kubler-Ross and a discussion of the stages as they relate to both the dying person and the family; (2) the phase of grief after a loss as explained by Colin Murray Parkes; (3) the tasks of mourning developed by William Worden; and (4) the specific needs of the dying and the bereaved. The experiential portion of the training is presented as including role-play and exercises designed to explore the participants' own experiences with and attitudes toward death and dying. It is noted that the exercises, which are done in small groups and dyads, enable the participants to work through unresolved grief and to use their newly acquired listening and helping skills with other participants. Descriptions of the exercises are included in the appendix. It is suggested that this program could be used effectively in training counselors, nurses, physicians, social workers, ministers, funeral directors, police officers, and others who work with the bereaved. (Author/NRB)

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Death and Dying Training For Crisis Intervention

Theresa D. Hutchison

and

Avraham Scherman

University of Oklahoma

CG 018940

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Running Head: DEATH AND DYING TRAINING

Abstract

A program which trains volunteers to assist individuals and families in times of crisis related to terminal illness and death is described. The training program has been used successfully for the past three years to train volunteers in crisis intervention with individuals and families experiencing preparatory grief or grief after a loss. The training is both didactic and experiential. The didactic portion includes a description of the stages of preparatory grief (Kubler-Ross, 1969 & 1978) and a discussion of the stages as they relate to both the dying person and his/her family, a description of the phases of grief after a loss (Colin Murray Parkes, 1972), the tasks of mourning (William Worden, 1982) and the specific needs of the dying and the bereaved.

The experiential portion of the training includes role-play and exercises designed to explore the participants' own experiences with and attitudes toward death and to encourage each participant to anticipate his or her own death and dying. The exercises, which are done in small groups and dyads, enable the participant to work through unresolved grief and to use their newly acquired listening and helping skills with another participant. Descriptions of the exercises are included in the appendix. This program could be used effectively in training counselors, nurses, physicians, social workers, ministers, funeral directors, police officers, and others who deal with the bereaved.

Death and Dying Training

for Crisis Intervention

Preparations for the Care Ministry Training Program were begun in the Spring of 1983. The program was initiated by an administrator in Continuing Education at a Southern University. He had recently experienced the stress associated with the long-term fatal illness of his mother-in-law and had become aware of the drain such an illness places, not only upon the family, but also upon the resources of the church in giving support to the family. He assumed that most clergy have limited time for visitation because of the many other tasks which they must perform, that few churches have sufficient professional staff to meet the needs of its members for visitation, but that concerned, sensitive, lay members of the church could assume the visitation mission if they were properly trained. A Human Relations consultant was recruited to design the training program. The specific goals of the training program were stated as follows:

A. Developing and improving the interpersonal skills involved in effective visitation.

B. Understanding the nature of crisis, crisis management and intervention.

C. Understanding the impact of death and dying on the individual and significant other people.

D. Building collaborative learning/service teams of lay and clergy.

E. Providing information on relevant community services.

The senior author was recruited to design and instruct two three-hour sessions, one on preparatory grief and one on coping with grief after a loss. It is this portion of the Care Ministry Training Program which will be described in this paper.

The training of volunteers is based upon Bugen's premise that properly trained volunteers can help the dying and the bereaved on two levels: 1) they can refer individuals to relevant community resources, and 2) they can offer support, "listening without deep probing or confrontation" (Bugen, 1980), p. 18). The six hours of training given in dying and bereavement is considered minimum but adequate within the context of the Care Ministry Training Program, since other sessions are devoted to listening/communication skills and to information about available community resources.

The training program in death and dying, though originally designed for clergy and lay members of churches, could be used effectively in training counselors, nurses, physicians, social workers, funeral directors, police officers, and others who deal with the dying and the bereaved. Training in empathetic listening and responding and the provision of information concerning community resources should precede the training concerning death, dying, and bereavement, which will be described here.

The training program is both didactic and experiential, designed to impart information, to allow the participants to explore their own feelings about death, to improve awareness of one's personal rules of grieving which were assimilated during childhood, and to bring to a greater degreee of resolution some of the unresolved grief of each trainee.

The experiential component is considered an essential part of the training. Many authors emphasize the need for self awareness in persons who wish to help the dying or the bereaved (Raphael, 1980; Josef, 1980; Grady and Strober, 1980; Whelan & Warren, 1980). Grady and Strober (1980) stress the importance of the individual's attitudes toward death; Corazzini (1980) contends that a person can help another individual with grief work, he/she must have accepted his/her own mortality, as well as that of others, must have acknowledged his/her own losses and have reached a successful resolution of his/her own grief. Engel (1980) and Frantz (1984) suggest that work with the dying and the bereaved puts one in touch with one's own losses, unresolved grief, and fear of losing loved ones. Inclusion of experiential exercises in the traning program is based upon the premise that the pain which this awareness entails might drive the well meaning person away from the people in need of an empathetic listener. Indeed, Le Shan and Le Shan (1961) suggest that the clinician's own fear of death causes him/her to avoid the dying. Furthermore, Josef (1980) has observed that "dying patients tend to be very sensitive to what the people around them can take" (p. 127) Consequently, they may avoid speaking of their impending death with people whose anxiety is aroused by the subject. This would lead to the emotional isolation of a dying person at a time when he/she is in greatest need of emotional support. Therefore, it is important to become aware of one's attitudes and feelings toward death and to deal with them insofar as possible.

Whelan and Warren (1980) conducted a study in which they demonstrated a change in attitudes toward death and a decrease in death anxiety in individuals who participated in a day-long workshop consisting of lecture and experiential exercises.

In the training program described here the didactic and experiential components of training are interwoven, rather than distinct. The trainees are encouraged to relate the information given during lecture to their personal experiences; and some of the exercises afford an opportunity to impart information. For example, one exercise requires each participant to list his or her losses, both major losses and minor ones. Afterward each participant is asked to share with the group one or two of these losses. Invariably many kinds of losses will be shared--loss through divorce, loss through relocation, the death of a child, the death of an aged parent, the death of a parent which occurred when the participant was a child, the death of a loved one after a prolonged illness, loss through suicide, and many other kinds of losses. This affords an opportunity to discuss the distinctive features of each type of loss and the unique problems incurred with each.

First Session: Death and Dying

The goals of the first session are threefold: 1) to learn about preparatory grief, 2) to explore the participants' personal experiences with death, and 3) to anticipate their own death and dying.

The stages of grief in anticipation of death as described by Elisabeth Kubler-Ross (1969 & 1978)--denial, anger, bargaining, depression, and acceptance--are discussed in relation to both the dying person and the

family of the dying person. The stages are presented to enrich the participants' understanding of themselves and the people with whom they will work and to enable them to facilitate, rather than obstruct, the preparatory grief process. Role play is sometimes used to illustrate facilitative vs. obstructive approaches to the dying patient.

Three exercises are used in session one:

Exercise One: This exercise is introduced at the beginning of the session after introductory remarks have been made. It consists of the following steps:

1. Each person is asked to list his/her losses, both big and small.
2. Each individual, including the instructor, shares one or two losses with the group.

This exercise usually generates considerable emotion, often accompanied by tears, and results in group support and cohesiveness. It makes the participants more likely to relate the lecture to their personal experiences and affords the instructor an opportunity to model facilitative responses to a grieving person.

Exercise Two: Role Throw-away: This exercise is introduced after addressing the multiple losses that a dying person sustains--loss of all loved ones and loss of all roles in life--and is designed to get the participants in touch with the loss of roles, to rehears that aspect of their own deaths.

Exercise Three: Grief History: The purpose of this exercise is to put each participant in touch with the feelings associated with early

losses, recent losses, and the anticipation of future losses and to make him/her cognizant of the ways he/she has coped with losses in the past.

Second Session: Loss and Grief

The goals of the second session are 1) to learn about grief reactions after loss, 2) to put the participants in touch with some of their own unresolved grief, and 3) to bring about a greater degree of resolution of that grief.

The major components of lecture include a description of the phases of mourning after a loss, as described by Colin Murray Parkes (1972), and the tasks of mourning delineated by William Worden (1982). Parkes (1972) describes a period of numbness, which is usually experienced immediately after learning of the death and which protects the newly bereaved from a flood of feelings which he/she is ill equiped to handle. This is followed by a phase of yearning, in which the bereaved person yearns for the loved one and tends to deny the permanance of the loss. The third phase of mourning, according to Parkes, is a phase of disorganization and despair, which is characterized by confusion, desperation, anxiety, and even panic. The fourth phase of mourning is the phase of reorganized behavior, in which the bereaved individual begins to rebuild his/her life in the absence of the dead loved one.

Worden (1982) has stated that four tasks must be accomplished before grief can be resolved: 1) the reality of the loss much be accepted; 2) the pain of grief must be experienced; 3) an adjustment to an environment in

which the deceased is missing must be made; and 4) finally, emotional energy must be withdrawn from the deceased and reinvested in the living. Worden contends that the accomplishment of each task is dependent upon the completion of all the tasks preceding it. Since the first two tasks are especially painful, caring people might circumvent the process by supporting denial of the loss or by attempting to divert the bereaved from their pain before they have fully grieved their loss. Role play is sometimes used in training to illustrate ways in which well-meaning people may divert the bereaved from their necessary grief work, in contrast with ways in which one can facilitate grief work while still offering emotional support to the bereaved.

Two exercises are used in session two:

Exercise One: Personal Rules of Mourning: This exercise is introduced after the tasks of mourning have been discussed. It is designed to make the participants aware of the "dos and don'ts" of grieving which they introjected as children and to distinguish between those which enable them to accomplish the tasks of mourning as contrasted with those which obstruct grief work. An assumption is made that awareness makes conscious choice possible for the participants in grieving their own losses and also makes it less likely that they will impose their personal rules of mourning upon the people whom they wish to support.

Exercise Two: Remnants of Grief: This is an exercise using guided imagery which is done in pairs. It is based upon two assumptions:

first, that grief work is rearely fully accomplished in that there are usually remnants of grief that surface under certain circumstances; and second, that a satisfactory resolution of one's own grief is important in freeing oneself to become available to people in mourning. The exercise enables each member of the dyad to alternate in attaining further resolution of some remnant of grief and in practicing the application of their emphathetic communication skills and the knowledge acquired in the workshop.

A description of this training program is not presented as ideal. It is offered as an effective means of training people to work with the dying, with families of the dying, and with the bereaved when training time is limited. Six hours is considered to be the minimum amount of time adequate for training. Additional useful information and exercises could be offered if the training time were extended.

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Appendix

Death and Dying: Exercises

Exercise One: Personal Loss

I. Purpose: To get the participants in touch with their losses and to develop group support and cohesiveness.

II. Procedure:

1. Ask each person to list on a sheet of paper his/her losses, both large and small.
2. Ask each individual who is willing to share one or two losses with the group. The instructor also participates in this exercise.

Exercise Two: Role Throw Away

I. Purpose: To allow the participants to rehears one aspect of their own deaths--the loss of important roles--and to put them in touch with the feelings associated with this loss.

II. Procedure:

1. Participants divide into groups of four or five.
2. On ten small pieces of paper each person writes ten emotionally significant roles which they play in life.
3. Within the small groups, each participant throws away first three then two, then two more roles. The last three roles are thrown away one at a time. Before throwing away each role, the participant tells the other members of

his/her small group what the role means to him/her and what it will mean to lose it.

4. The exercise ends with processing and sharing in the larger group.

Exercise Three: Grief History

I. Purpose: To put each participant in touch with the feelings associated with early losses, recent losses, and the anticipation of future losses and to make him/her cognizant of the ways in which he/she has coped with losses in the past.

II. Procedure: Each participant is asked to complete the following questionnaire which is taken verbatim from Worden, J.W. (1982). Grief Counseling and Grief Therapy, NY: Springer, pp. 110-111.

1. a. The first death I can remember was the death of _____.

   b. I was _____ years old.

   c. The feelings I remember I had at the time were _____.

2. a. The first funeral (wake or other ritual service I ever attended was for _____.

   b. I was _____ years old.

   c. The thing I remember most about that experience is _____.

3. a. My most recent loss by death was _____.

   b. The time and circumstances of this loss were _____.

   c. I coped with this loss by _____.

4. a. The most difficult death for me was the death of _____.

   b. It was difficult because _____.

   c. I coped with this loss by _____.

5. a. Of the important people in my life who are now living, the most difficult death for me would be the death of _____.

   b. It would be the most difficult because _____.

6. My primary style of coping with loss is _____.

7. I know my grief is resolved when _____.

Loss and Grief: Exercises:

Exercise One: Personal Rules of Mourning

I. Purpose: To make the participants aware of the rules for grieving which they introjected as children and to distinguish between rules which facilitate mourning and those which obstruct it; to decrease the probability that the participants will impose their personal rules upon others.

II. Procedure:

1. Divide into small groups.
2. Provide easels with newsprint or a satisfactory substitute and ask the members of each group to do the following:
   a. List the rules of mourning that they assimilated as children (not customs, but rules of behavior, such as, "You must speak only good of the dead").
   b. Ask themselves two questions: 1) What happens to grief work when this rule is kept? 2) What would happen to grief work if this rule were broken?
   c. Put a line through the rules which they wish to discard, leaving the rules which they wish to keep.
3. Reassemble in the larger group and ask each small group to report to the group as a whole.

Exercise Two: Remnants of Grief

I. Purpose:

1. To facilitate resolution of some remnant of grief.
2. To practice the application of emphathetic communication skills and the knowledge acquired in the workshop.

II. Procedure:

1. Introduce the exercise by mentioning the importance of a satisfactory resolution of one's own grief in freeing oneself to become available to people in mourning.

2. Have participants form dyads. Assign roles of "helper" and "helpee."

3. Send helpers out of the room to get instructions from an assistant while the instructor leads the helpees in a guided imagery exercise

4. Bring the helpers back into the room to join their partners, who share with them.

5. Reverse the roles of helper and helpee and repeat the exercise.

6. Debrief in large group.

III. Instructions to helpers: "Your partner is participating in an exercise designed to put them in touch with a remnant of unresolved grief and to help them attain a greater degree of resolution. When you return to them, facilitate the process of resolution as well as you can."

IV. Guided Imagery:

Get into a comfortable position, close your eyes, and relax as much as you can. Shift around to become even more comfortable and more relaxed.

And now imagine that you are in some very beautiful setting, a place where you feel safe and secure, a place where you feel at home and at ease. Become aware of some of the details surrounding you--what you see--what you hear--what you feel.

And as you look around, begin to think about people you know who have died. Be aware that you might discover some remnants of grief. And among all these people you remember who have died, you may begin to notice one in particular whom you loved dearly. Bring that person into your beautiful, safe place. Watch as the person approaches you. Observe the two of you greeting each other in the way that is most natural and satisfying to you.

And now, imagine that the two of you are sitting down comfortably and that you are beginning to recall old times. The memories come back, one upon the other . . . many familiar sights and sounds and feelings from the past come and then pass on, one after the other.

In time the memories give way to the presence of the person with you. As you become aware of the other's presence, you sense that there is something you want to say to that person. Say it now . . . . . You listen closely for an answer from that person. Let that person answer you now.

All is quiet again. And you begin to feel the goodness of this person, and you feel appreciation. Express this appreciation now.

Perhaps you need to ask forgiveness for something you did, or thought you did, or failed to do. Ask forgiveness now . . . . And now notice what the other person says and does.

And now remember some really lovely things you did for that person. Let that person tell you about them and thank you for them. . . . Express your love for each other in a way that is most satisfying to you.

You gradually begin to realize the person is about to go away. There may be something that you want to happen between the two of you, something that will let you feel peaceful and complete with the person. Allow this thing to happen now.

And now you become aware that the time for departure has come. Listen as the person says goodbye to you . . . . And now you say goodbye, too . . . And as the person fades and then is gone, you find a special gift has been placed in your hand. You hold this gift and notice its color and its texture and its form . . . Now allow the gift to fade.

Slowly, at your own pace, come back to the room, but only when you are ready. Feel the floor beneath you. Let your eyes wander slowly around the room, and begin to move when you return fully.

In the present, allow yourself whatever time you need to integrate the experience. When you are ready, be with your partner to share your remnants of grief. Signal him or her, and begin.